## EXHIBIT D 2003 BUILDING STATUS REPORT

(RHS and Section 8 units are not exempt. Complete ONE form for EACH building designated low income housing credits.)

Project Name	Total No. Rental Units in Building	Page of
Building I.D. No. (BIN): TN	No. Low Income Units in 2002	Prepared by:
City	*Total No. Low Income Units 12/31/03	Title:
County	*Percent of Low Income Units 12/31/03_ *If not 100% low income, submit Exhibit C: Applicable Fraction Wo	Telephone No.:
(NOTE: PLEASE READ INSTRUCTIO	NS ON NEXT PAGE BEFORE COMPLETING THIS FORM. ALSO ATTACH APPLICABLE UTI	

Unit No.	Number of Bedrms	Feet	Move in Date (1)	Resident Name	Move in Income	Move in Rent	2003 Recert Date (2)	2003 Recert Income (2)	2003 Recert Rent (2)	No. in House- Hold	NQS (3)	Utility Allowance (Monthly)	Resident Paid Rent (4)	Special Needs Code (5)	Move out Date
												(5) 0			

- (1) Move in dates for existing residents in rehabbed buildings is the date the buildings were purchased.
- (2) If recertification is not due in 2003, leave blank.

c:\lihc\forms\2003\03Exh-D.xls HO-0421 (Rev 10/98)

- (3) Is the unit entirely occupied by students?
  Yes = Y
  No = N
- (4) If the resident receives a Section 8 or RHS subsidy indicate the dollar amount the resident pays towards their monthly rent.
- (5) Special needs population identifiers: F = RHS (FmHA) assisted
  - S = Section 8 assisted
  - ELD = Elderly Resident
  - DIS = Disabled Resident 20/50 = Very Low Income Resident.
  - M = Market Rate Resident